

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OFFICIAL WARNING



VIOLATION OF FEDERAL REGULATIONS

CASE NO.

OH 120028

VIOLATOR

Customer # 325413
Certificate # 31-A-0407
Delbert Yoder

ADDRESS (Street, City, State, Zip Code)

4691 Winklepleck Road NW
Sugarcreek, OH 44681

The Department of Agriculture has evidence that on or about **December 20, 2011** you or your organization committed the following violation of Federal Regulations:

9 CFR, SECTION

Failure to

2.40 (a)(2)

- Assure that the attending veterinarian has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

(Licensee failed to follow instructions of the attending veterinarian with regard to canine brucellosis infection.)

2.40 (b)(2)

- Establish and maintain adequate veterinary care that includes the use of appropriate methods to prevent, control, diagnose, and treat diseases and injuries, and the availability of emergency, weekend, and holiday care.

(**A juvenile brown and white male bulldog mix has a swollen mass in the corner of the right eye.

**A female dark cream poodle, USDA tag#90, has brownish material covering the entire right cheek teeth.

**USDA tag# 90, over half of upper right canine is covered with brownish material.

**USDA tag# 90, gums are inflamed with gray/white material observed at the base of the teeth.)

Titles 7 & 9 Code of Federal Regulations were promulgated to help prevent the spread of animal and plant pests and diseases and assure the humane treatment of animals. Since violations of the regulations can have serious and costly impact detrimental to the public interest, you are warned of this violation. Any further violation of these regulations may result in the assessment of a civil penalty or criminal prosecution. If you have any questions concerning this warning or violation, please contact the listed APHIS Official.

APHIS OFFICIAL (Name and Title)

Elizabeth Goldentyer, DVM

Regional Director

DATE ISSUED

2/24/12

BY: (Name and signature)

OFFICE ADDRESS:

920 Main Campus Dr., Suite 200
Raleigh, NC 27606

TELEPHONE NO. AC (919) 855-7100

DATE RECEIVED:

FOR CERTIFIED MAIL - RECEIPT NO:
7011 1150 0002 0711 6777